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June 17, 2005

TO: Each Supervisor

FROM: Thomas L. Garthwaite, M.D. WWW.S.

Director and Chief Medical Officer

Kae Robertson Managing Director

Navigant Consulting, Inc.

SUBJECT: KING/DREW MEDICAL CENTER ACTIVITY REPORT – WEEK ENDING

June 17, 2005

This is to provide you with an activity report for the week ending June 17, 2005 for King/Drew Medical Center (KDMC).

Kalebert

Progress Made in KDMC Quality Turnaround Plan

- Clinical Pertinence Review
 - As part of our continuing efforts to prepare for Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) re-accreditation application, we are streamlining clinical pertinence review process. A clinical pertinence reporting software will be installed within the Medical Records department to implement concurrent reviewing and reporting of the review result. The review criteria are being developed to reflect JCAHO requirements, the plan of correction submitted to the Centers for Medicare and Medicaid Services, and other quality criteria as appropriate.

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Laboratory

- Blood culture contamination rate was decreased to 2.7 percent in May (better than the national standard). The laboratory department continued providing hands-on phlebotomy training for nurses in the Emergency Department, as well as training for new nurses entering KDMC, including travelers. Approximately 200 nurses have undergone the training.
- We are preparing for the July 11 opening of Client Response Center (CRC), a one-stop service for all lab-related inquiries.

Pharmacy

The Medication Event Task Force has approved the "Medication Error Reporting Form" that will be used throughout KDMC to report all medication errors. Currently the error reporting form has been utilized within Emergency Department. The form will be distributed to all other areas for use. All reporting forms will be submitted to the pharmacy department, which will keep track of medication errors. The pharmacy department will conduct education sessions to ensure dissemination of the reporting form. We will also ensure that communication/information sharing between the pharmacy department and risk management department take place on a regular basis. The purpose is to increase error reporting including those with "no harm" and "near misses".

o Radiology

Two additional physicians have started on a part-time basis to provide coverage for daytime. Contracts for two part-time nuclear medicine radiologists are being finalized. We also are continuing to work to provide 24-hour teleradiology provision. The report backlog that occurred during the staffing crisis is being reduced.

Executive Recruiting

 Four qualified candidates are identified for CEO position; three interviews were conducted on June 10 and one was conducted on June 13.

o Labor Union Relations

 Participated in the Labor Management Meeting on June 8. The meeting will be held on a monthly basis to enhance collaboration with SEIU Local 660, including increased communication with unit stewards.

Weekly Dashboard

With collaboration from areas and information services department, we have established most of the dashboard items' weekly data collection methods. Navigant consultants will continue to work closely with each responsible data holder to ensure accurate and timely data collection. Once the data collection becomes "routine", we will identify a KDMC resource to transition the dashboard.

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- o Community Outreach
 - Hank Wells, Roger Peeks, MD, and Dr. Garthwaite briefed community ministers on the status and progress at KDMC.
- o Capital Improvements
 - Dr. Garthwaite and other DHS officials met with CAO and staff to review the proposed schedule for capital improvements at KDMC.

Please let us know if you have any questions.

TLG:KR:mm

c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors